Approved for use through 7/31/2008. OMB 0651-062

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Papetwork Reduction Act of 1935, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876 Application or Docket Number APPLICATION AS FILED - PART I (Column 1) OTHER THAN (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE RATE (\$) FEE (\$) (87 CFR 1.16(a), (b), or (d)) RATE (\$) FEE (\$) SEARCH FEE (37 OFR 1.(6(k), (1), or (m)) **EXAMINATION FEE** (87 OFR 1.18(o), (p), or (q)) TOTAL CLAIMS (87 CFR 1.16(II) minus 20 = 05 INDEPENDENT CLAIMS x 57 OR (37 CFR 1.16(h)) = 8 aunim 100 If the specification and drawings exceed 100 x 200 = APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) 80 60 If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Cólumn 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY OR CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PŘESENT ATE (\$) AFTER ADDI: ENT. PREVIOUSLY EXTRA RATE (\$) ADDI-AMENDMENT TIONAL PAID FOR Total TIONAL. Minus FEE (\$) FEE (\$) Independent (37 CFR L16(N)) Minus OR' Application Size Fee (37 CFR 1.16(s)) 00 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) 80 0 U OR TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 9) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) IDMENT AFTER AMENDMENT PREVIOUSLY PAID FOR ADDI-EXTRA RATE (\$) TIONAL FEE (\$) ADDI-TIONAL FEE (\$) Total (27 CFR 1.160)) Minus Independent (37 OFR 1.16(h)) OR Minus Z Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 OFR 1.16(1))

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "9".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and the amount of three you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450,

TOTAL ADD'L FEE

OR

TOTAL